

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY  
(includes Reference to PCT International Applications)

ATTORNEY'S DOCKET  
NUMBER  
**951/49129**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**FUEL SYSTEM FOR A MOTOR VEHICLE**

the specification of which (check only one item below):

is attached hereto.

was filed as United States application  
Serial No. \_\_\_\_\_  
on \_\_\_\_\_  
and was amended  
on \_\_\_\_\_ (if applicable).

was filed as PCT international application  
Number PCT/EP00/01599  
on 25 February 2000 (25.02.00)  
and was amended under PCT Article 19  
on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations. §1.56(a).

I hereby claim foreign priority benefits under Title 35, United State Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

**PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:**

COUNTRY (if PCT indicate PCT)	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
Germany	199 11 068.9	12 March 1999 (12.03.99)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

Combined Declaration For Patent Application and Power of Attorney (Continued)  
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I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

**PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT  
UNDER 35 U.S.C. 120**

U.S. APPLICATIONS		STATUS ( <i>Check one</i> )		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
<b>PCT APPLICATIONS DESIGNATING THE U.S.</b>				
PCT APPLICATION NO	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (IF ANY)		

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Herbert I. Cantor, Reg. No. 24,392; James F. McKeown, Reg. No. 25,406; Donald D. Evenson, Reg. No. 26,160; Joseph D. Evans, Reg. No. 26,269; Gary R. Edwards, Reg. No. 31,824; and Jeffrey D. Sanok, Reg. No. 32,169

Send Correspondence to: Evenson, McKeown, Edwards & Lenahan, P.L.L.C. 1200 G Street, N.W., Suite 700 Washington, D.C. 20005				Direct Telephone Calls to: (name and telephone number)  (202) 628-8800
201	FULL NAME OF INVENTOR	FAMILY NAME KROISS	FIRST GIVEN NAME Hugo	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Groebenzell	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Groebenbachstrasse 12A	CITY Groebenzell	STATE & ZIP CODE/COUNTRY D-82194 GERMANY
202	FULL NAME OF INVENTOR	FAMILY NAME LOESCH	FIRST GIVEN NAME Simon	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Wartenberg	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Moosburger Strasse 5	CITY Wartenberg	STATE & ZIP CODE/COUNTRY D-85456 GERMANY
203	FULL NAME OF INVENTOR	FAMILY NAME TREML	FIRST GIVEN NAME Christian	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Muenchen	STATE OR FOREIGN COUNTRY GERMANY	COUNTRY OF CITIZENSHIP Austria
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Appenzeller Strasse 5	CITY Muenchen	STATE & ZIP CODE/COUNTRY D-81475 GERMANY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	Date	DATE

Combined Declaration For Patent Application and Power of Attorney (Continued)  
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Send Correspondence to:  Evenson, McKeown, Edwards & Lenahan, P.L.L.C. 1200 G Street, N.W., Suite 700 Washington, D.C. 20005				Direct Telephone Calls to: <i>(name and telephone number)</i>  (202) 628-8800
204	FULL NAME OF INVENTOR	FAMILY NAME WISSENBACH	FIRST GIVEN NAME Georg	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Berg	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Weihersfeld 14	CITY Berg	STATE & ZIP CODE/COUNTRY D-82335 GERMANY
205	FULL NAME OF INVENTOR	FAMILY NAME BODE	FIRST GIVEN NAME Henning	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Einbeck	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Neue Reihe 11	CITY Einbeck	STATE & ZIP CODE/COUNTRY D-37574 GERMANY
206	FULL NAME OF INVENTOR	FAMILY NAME TURINI	FIRST GIVEN NAME Juergen	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Maisach	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP D-82216 GERMANY
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Lindenstrasse 1	CITY Maisach	STATE & ZIP CODE/COUNTRY D-85581 GERMANY
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.				
SIGNATURE OF INVENTOR 204		SIGNATURE OF INVENTOR 205		SIGNATURE OF INVENTOR 206
DATE		Date		DATE

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207	FULL NAME OF INVENTOR  HOFRICHTER	FAMILY NAME	FIRST GIVEN NAME Michael	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP  Vaterstetten	CITY	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS  Goldregenweg 3	POST OFFICE ADDRESS	CITY Vaterstetten	STATE & ZIP CODE/COUNTRY D-85581 GERMANY
208	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
209	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
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SIGNATURE OF INVENTOR 207		SIGNATURE OF INVENTOR 208		SIGNATURE OF INVENTOR 209
DATE		Date		DATE